

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6813

## FORM C/OH COVER SHEET PG 1

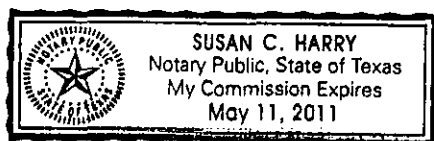
The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Karen	MI 
	NICKNAME	LAST Huber	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 302495 Austin, TX 78703		
	<div style="border: 1px solid black; padding: 5px;"> <b>OFFICE USE ONLY</b>  Date Received  Date Hand-delivered or Date Postmarked  Receipt # Amount  Date Processed  Date Imaged </div>		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Karen	MI 
	NICKNAME	LAST Huber	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 23020 Pedernales Canyon Trail Spicewood, TX 78669-6431		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 01/25/2008    02/23/2008		
10 ELECTION	ELECTION DATE Month Day Year 03/04/2008		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Cty. Commissioner, Pct. 3
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Huber, Karen (Mrs.)		15 ACCOUNT # (Ethics Commission filers) 00000001	
16 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	650.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	15,511.28
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	308.69
	4. TOTAL POLITICAL EXPENDITURES	\$	31,307.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	13,217.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

## 18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Karen Huber  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Karen Huber, this the 25<sup>th</sup> day of February, 2008, to certify which, witness my hand and seal of office.

Susan C. Harry  
Signature of officer administering oath

Susan C. Harry  
Print name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/8 Report: 3/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

4 Date

02/19/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Akins, Pamela

6 Contributor address; City; State; Zip Code  
1025 Marly Way  
Austin, TX 78733

7 Amount of  
contribution (\$)

\$200.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/23/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ayres, Patricia

Contributor address; City; State; Zip Code  
5705 Scout Island Cove  
Austin, TX 78731

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
retired

Date

02/13/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bain, Shelly

Contributor address; City; State; Zip Code  
2604 Rollingwood Dr.  
Austin, TX 78746

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/22/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Biggs, Neva & Bill

Contributor address; City; State; Zip Code  
24105 Pedernales Cliff Trail  
Spicewood, TX 78669

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
construction

Employer (See Instructions)  
self.

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bonner, Cathy

Contributor address; City; State; Zip Code  
22 Margranita Crescent  
Austin, TX 78703

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/8 Report: 4/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/19/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Branniff, Wendall6 Contributor address; City; State; Zip Code  
10625 Legends Lane  
Austin, TX 787477 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/18/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bridges, RussellContributor address; City; State; Zip Code  
6405 Cascada Dr.  
Austin, TX 78750Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bristol, ValerieContributor address; City; State; Zip Code  
512 Bulian Lane  
Austin, TX 78746Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Christian, Jo AnneContributor address; City; State; Zip Code  
7905 Moritz Lane  
Austin, TX 78731Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coburn, KathleenContributor address; City; State; Zip Code  
7960 Mesa Trails Circle  
Austin, TX 78731Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/8 Report: 5/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

01/25/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Collins, Nancy

6 Contributor address; City; State; Zip Code  
1408 Mohle Dr.  
Austin, TX 78703

7 Amount of  
contribution (\$)

\$250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Davis, Robert

Contributor address; City; State; Zip Code  
3607 Pinnacle Rd.  
Austin, TX 78746

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/21/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Deaton, Florence

Contributor address; City; State; Zip Code  
2255 Kent Dr.  
Largo, FL 33774

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/15/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Emanuel, Victor

Contributor address; City; State; Zip Code  
1507 Alameda  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fason, Maydelle

Contributor address; City; State; Zip Code  
1607 Pogunock  
Austin, TX 78703

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/8 Report: 6/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/22/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fatzner, Sylvia

6 Contributor address; City; State; Zip Code  
2003 Red Fox Rd.  
Austin, TX 78734

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/11/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ford Smith Investment

Contributor address; City; State; Zip Code  
PO Box 6156  
Austin, TX 78762

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Friday, Philip

Contributor address; City; State; Zip Code  
700 Lavaca  
Suite 1150  
Austin, TX 78701

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gilles, Janet

Contributor address; City; State; Zip Code  
1212 Guadalupe #502  
Austin, TX 78701

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/15/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ladd, Clifton

Contributor address; City; State; Zip Code  
1509 Newning Ave.  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/8 Report: 7/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/14/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lebermann, Lowell Jr. (Mr.)

6 Contributor address; City; State; Zip Code  
3834 Promontory Point Dr.  
Austin, TX 78744-1100

7 Amount of  
contribution (\$)

\$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Chairman of the Board

10 Employer (See Instructions)  
Centex Beverage, Inc.

Date

02/17/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Logan, Kelly

Contributor address; City; State; Zip Code  
8510 Bargamin Dr.  
Austin, TX 78736

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/26/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
London, Alice

Contributor address; City; State; Zip Code  
101 Ridgmont Court  
Austin, TX 78746

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
attorney

Employer (See Instructions)  
Bishop, London & Dodds

Date

02/07/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lowenthal, Eugene I. (Mr.)

Contributor address; City; State; Zip Code  
9600 Crumley Ranch Rd.  
Austin, TX 78738-6011

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mattsson, Chris

Contributor address; City; State; Zip Code  
3300 Bee Caves Rd.  
Austin, TX 78746

Amount of  
contribution (\$)

\$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
community volunteer

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/8 Report: 8/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

01/27/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

McAtee, Lynda

6 Contributor address; City; State; Zip Code

7400 Seneca Falls Loop  
Austin, TX 78739

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Nowlin, Bettye

Contributor address; City; State; Zip Code

PO Box 684489  
Austin, TX 78768

Amount of  
contribution (\$)

\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
community volunteer

Employer (See Instructions)

Date

02/22/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Phillips, James (Mr.)

Contributor address; City; State; Zip Code

25008 Pedernales Canyon Trail  
Spicewood, TX 78669

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Pinnelli, Janis (Mrs.)

Contributor address; City; State; Zip Code

P.O. Box 50038  
Austin, TX 78763

Amount of  
contribution (\$)

\$400.00

In-kind contribution  
description (if applicable)  
event expenses

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
General Contractor

Employer (See Instructions)  
Self Employed

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Reed, Pamela

Contributor address; City; State; Zip Code

1503 Harbor View  
Austin, TX 78746

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/8 Report: 9/15

2 FILER NAME Huber, Karen (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/13/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reese, Pamela (Mrs.)6 Contributor address; City; State; Zip Code  
3511 Westlake Dr.  
Austin, TX 78746-16107 Amount of  
contribution (\$)

\$346.28

8 In-kind contribution  
description (if applicable)  
event expenses(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/20/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Soifer, JanContributor address; City; State; Zip Code  
5408 Hurlock Dr.  
Austin, TX 78731Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/25/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stephens, PattyContributor address; City; State; Zip Code  
3901 Westlake  
Austin, TX 78746Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sternberg, RickContributor address; City; State; Zip Code  
24815 Hamilton Pool Rd.  
Round Mountain, TX 78663Amount of  
contribution (\$)

\$3,565.00

In-kind contribution  
description (if applicable)  
web production(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
OwnerEmployer (See Instructions)  
AIM Productions

Date

02/21/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Walden, ElizabethContributor address; City; State; Zip Code  
813 Sunfish St.  
Lakeway, TX 78734Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 8/8 Report: 10/15

**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

02/19/2008

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wetzels, Pamela**6** Contributor address; City; State; Zip Code  
4807 Placed Place  
Austin, TX 78731**7** Amount of  
contribution (\$)

\$200.00

**8** In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 1/5 Report: 11/15

**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT #

(Ethics Commission filers)

00000001

**4** Date

02/06/2008

**5** Payee name

American Campaign Signs &amp; Graphics

**7**

Amount

(\$)

\$4,833.64

**6** Payee address; City; State; Zip CodePO Box 1181  
Pittsburg, TX 75686**8** Purpose of payment (See instructions regarding type of information required.)

yard signs

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/12/2008

Payee name

American Campaign Signs &amp; Graphics

Amount

(\$)

\$4,644.69

Payee address; City; State; Zip Code

PO Box 1181  
Pittsburg, TX 75686

Purpose of payment (See instructions regarding type of information required.)

yard signs

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/12/2008

Payee name

Asian American Progress PAC

Amount

(\$)

\$100.00

Payee address; City; State; Zip Code

PO Box 4560  
Austin, TX 78765

Purpose of payment (See instructions regarding type of information required.)

event sponsorship

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/15/2008

Payee name

Austin Chronicle

Amount

(\$)

\$749.00

Payee address; City; State; Zip Code

PO Box 302495  
Austin, TX 78703

Purpose of payment (See instructions regarding type of information required.)

advertising

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 2/5 Report: 12/15

**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT #

(Ethics Commission filers)

00000001

**4** Date

01/25/2008

**5** Payee name

Brunt, Chris (Mr.)

**7**

Amount

(\$)

\$1,600.00

**6** Payee address; City; State; Zip Code2408 Manor Rd  
Apt. 212  
Austin, TX**8** Purpose of payment (See instructions regarding type of information required.)

Contract Labor &amp; cell phone stipend

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/21/2008

Payee name

Fischer, Adrienne

Amount

(\$)

\$600.00

Payee address; City; State; Zip Code

6107 Mesa Drive  
Austin, TX 78731

Purpose of payment (See instructions regarding type of information required.)

contract labor

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/12/2008

Payee name

Goss, Delwin

Amount

(\$)

\$1,475.00

Payee address; City; State; Zip Code

6410 Ponca  
Austin, TX 78741

Purpose of payment (See instructions regarding type of information required.)

contract labor

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/15/2008

Payee name

Goss, Delwin

Amount

(\$)

\$100.00

Payee address; City; State; Zip Code

6410 Ponca  
Austin, TX 78741

Purpose of payment (See instructions regarding type of information required.)

contract labor

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 3/5 Report: 13/15**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date  
  
02/04/2008**5** Payee name  
Home Depot**7** Amount  
(\$)

\$57.15

**6** Payee address; City; State; Zip Code  
7900 RR 620 North  
Austin, TX 78726**8** Purpose of payment (See instructions regarding type of information required.)  
supplies**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

Payee name  
Kelly GraphicsAmount  
(\$)

02/06/2008

Payee address; City; State; Zip Code  
1322 Lost Creek Blvd.  
Austin, TX 78746

\$3,785.36

Purpose of payment (See instructions regarding type of information required.)  
printing\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

Payee name  
Kelly GraphicsAmount  
(\$)

02/14/2008

Payee address; City; State; Zip Code  
1322 Lost Creek Blvd.  
Austin, TX 78746

\$9,090.48

Purpose of payment (See instructions regarding type of information required.)  
printing\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

Payee name  
Mastercard/VisaAmount  
(\$)

02/01/2008

Payee address; City; State; Zip Code  
PO Box 194607  
San Francisco, CA 94119

\$169.95

Purpose of payment (See instructions regarding type of information required.)  
credit card fees\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 4/5 Report: 14/15**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  02/01/2008	<b>5</b> Payee name McCoy's  <b>6</b> Payee address; City; State; Zip Code 6200 Burleson Rd. Austin, TX 78744	<b>7</b> Amount (\$)  \$115.61
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**8** Purpose of payment (See instructions regarding type of information required.)  
supplies**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  02/04/2008	Payee name McCoy's  Payee address; City; State; Zip Code 6200 Burleson Rd. Austin, TX 78744	Amount (\$)  \$427.37
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Purpose of payment (See instructions regarding type of information required.)  
supplies\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  02/15/2008	Payee name Oak Hill Gazette  Payee address; City; State; Zip Code 7200 Highway 71 Austin, TX 78735	Amount (\$)  \$305.00
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Purpose of payment (See instructions regarding type of information required.)  
advertising\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  02/06/2008	Payee name Ranes, Jim  Payee address; City; State; Zip Code 1501 Barton Springs Rd. #233 Austin, TX 78704	Amount (\$)  \$312.38
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Purpose of payment (See instructions regarding type of information required.)  
graphic design\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 5/5 Report: 15/15

**2** FILER NAME Huber, Karen (Mrs.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date

02/06/2008

**5** Payee name

Sternberg, Rick

**7**Amount  
(\$)

\$1,716.26

**6** Payee address; City; State; Zip Code24815 Hamilton Pool Rd.  
Round Mountain, TX 78663**8** Purpose of payment (See instructions regarding type of information required.)

web production

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/19/2008

Payee name

Target

Amount  
(\$)

\$100.00

Payee address; City; State; Zip Code

5300 S Mo Pac Expy  
Austin, TX 78749

Purpose of payment (See instructions regarding type of information required.)

gift

**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/13/2008

Payee name

Westlake Picayune

Amount  
(\$)

\$816.75

Payee address; City; State; Zip Code

3103 Bee Cave Rd., Ste. 102  
Austin, TX 78746

Purpose of payment (See instructions regarding type of information required.)

advertising

**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐